| Fill in this | information to identify your | case: | | | |
|--------------------|--|------------------------------------|---------------------------|--------------------------------------|--|
| Debtor 1 | Devera L. Buchar | an | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United Stat | es Bankruptcy Court for the: | EASTERN DISTRICT OF | F WISCONSIN | | |
| Case numb | per 16-23613 | | | | |
| (if known) | 10-23013 | | | | ■ Check if this is an |
| | | | | | amended filing |
| | | | | | Ÿ |
| | Form 106E/F | | | | |
| <u>Schedu</u> | le E/F: Creditors W | ho Have Unsecu | red Claims | | 12/15 |
| left. Attach th | | e. If you have no information | | | number the entries in the boxes on the op of any additional pages, write your |
| | creditors have priority unsecure | | | | |
| _ | Go to Part 2. | u ciaiilis agailist you? | | | |
| ■ No. C | 30 to Part 2. | | | | |
| | List All of Your NONPRIORIT | Y Unsecured Claims | | | |
| | creditors have nonpriority unsec | | | | |
| | You have nothing to report in this p | | urt with your other och | oduloo | |
| _ | rou have nothing to report in this p | art. Submit triis form to trie cot | int with your other sche | adules. | |
| Yes. | | | | | |
| unsecure | | / for each claim. For each clair | m listed, identify what t | type of claim it is. Do not list cla | or has more than one nonpriority aims already included in Part 1. If more aims fill out the Continuation Page of |
| | | | | | Total claim |
| 4.1 AF | ·NI | Last 4 digits | of account number | 7501 | \$1,429.72 |
| | npriority Creditor's Name | | | | |
| | 10 Martin Luther King Dri DBox 3517 | ve When was th | e debt incurred? | | |
| _ | oomington, IL 61702-3517 | • | | | |
| | mber Street City State Zlp Code | As of the dat | e you file, the claim i | is: Check all that apply | |
| | o incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Continger | | | |
| | Debtor 2 only | ☐ Unliquidat | ed | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | IDDIODITY | Lateta | |
| _ | At least one of the debtors and and | D 04d4.l- | PRIORITY unsecured | ı cıaım: | |
| □ deb | Check if this claim is for a com | - | | vestion corrected the second | at you did not |
| | he claim subject to offset? | report as prio | | aration agreement or divorce that | at you did not |
| | No | ☐ Debts to p | ension or profit-sharin | ng plans, and other similar debts | S |

☐ Yes

■ Other. Specify Collection: US Cellular

Page 1 of 20

| AIS Services LLC | Last 4 digits of account number | 0843 | \$1,2 |
|---|--|---|-------|
| Nonpriority Creditor's Name 50 California Street, Suite 1500 | When was the debt incurred? | 2007 | |
| San Francisco, CA 94111-4612 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Factoring (| Company Account: Check N Go | |
| American General Finance Nonpriority Creditor's Name | Last 4 digits of account number | 4934 | Unl |
| 2972 S. Chase Avenue Milwaukee, WI 53207 | When was the debt incurred? | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Unsecured | loan | |
| Asset Acceptance, LLC | Last 4 digits of account number | | • |
| Nonpriority Creditor's Name PO Box 2036 | When was the debt incurred? | | |
| Warren, MI 48090-2036 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |

| Asset Management Out | Last 4 digits of account number | \$0 |
|---|--|---------|
| Nonpriority Creditor's Name 401 Pilot Court, Suite A Waukesha, WI 53188 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| No No | | |
| Yes | ■ Other. Specify Collection | |
| AT&T | Last 4 digits of account number 7311 | \$165 |
| Nonpriority Creditor's Name c/o Bankruptcy Dept. | When was the debt incurred? | |
| PO Box 769 | | |
| Arlington, TX 76004 | - | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| <u> </u> | П | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | Student loans | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Goods and/or Services | |
| Aurora Advanced Healthcare | Last 4 digits of account number 3369 | \$1,957 |
| Nonpriority Creditor's Name PO Box 091700 | When was the debt incurred? 2014 | |
| Milwaukee, WI 53209-8700 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | , a si ala dala yad ila, ala dalam isi anaka appi, | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 20

| Debtor | Devera L. Buchanan | Case number (if know) 16-23613 | |
|--------|--|--|----------|
| 4.8 | Aurora Medical Group | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name | | Ψ0.00 |
| | PO Box 340230 | When was the debt incurred? | |
| | Milwaukee, WI 53234 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | □ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Medical Expense | |
| | Charles G. McCarthy, Jr. Law | | |
| 4.9 | Offices | Last 4 digits of account number | \$123.10 |
| | Nonpriority Creditor's Name PO Box 1045 | When was the debt incurred? | |
| | Bloomington, IL 61702 | | |
| • | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | _ | | |
| | ☐ Yes | ■ Other. Specify Goods and/or Services | |
| 4.1 | Chase | Last 4 digits of account number | \$619.00 |
| | Nonpriority Creditor's Name | | |
| | Attn: Correspondence PO Box 15298 | When was the debt incurred? | |
| | Wilmington, DE 19850-5298 | - Accepted to the confined and the Confi | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | _ | Поли | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | ■ Other Specify Credit Card | |
| | | — Other, Specify | |

| \$ | | | Last 4 digits of account number | Children's Hospital of Wisconsin |
|------|------------------|--------------------------------|---|--|
| | | | When was the debt incurred? | lonpriority Creditor's Name Drawer 531 Milwaukee, WI 53278 |
| | | s: Check all that apply | As of the date you file, the claim i | lumber Street City State Zlp Code |
| | | | • | Who incurred the debt? Check one. |
| | | | ☐ Contingent | Debtor 1 only |
| | | | ☐ Unliquidated | Debtor 2 only |
| | | | Disputed | Debtor 1 and Debtor 2 only |
| | | l claim: | Type of NONPRIORITY unsecured | At least one of the debtors and another |
| | | | ☐ Student loans | Check if this claim is for a community |
| t | that you did not | ration agreement or divorce | ☐ Obligations arising out of a sepa report as priority claims | ebt s the claim subject to offset? |
| | bts | g plans, and other similar del | ☐ Debts to pension or profit-sharin | No |
| _ | | penses | Other Specify Medical Ex | Yes |
| \$10 | | 0997 | Last 4 digits of account number | Credit Management Control |
| · | | | | Ionpriority Creditor's Name |
| | | | When was the debt incurred? | 707 Rapids Drive |
| | | Chapte all that apply | As of the data you file the claim i | Racine, WI 53404-1743 lumber Street City State Zlp Code |
| | | s: Cneck all that apply | As of the date you file, the claim i | Who incurred the debt? Check one. |
| | | | ☐ Contingent | Debtor 1 only |
| | | | ☐ Unliquidated | Debtor 2 only |
| | | | ☐ Disputed | Debtor 1 and Debtor 2 only |
| | | l claim: | Type of NONPRIORITY unsecured | At least one of the debtors and another |
| | | | ☐ Student loans | Check if this claim is for a community |
| t | that you did not | ration agreement or divorce | Obligations arising out of a sepa | ebt |
| | L | | report as priority claims Debts to pension or profit-sharin | s the claim subject to offset? |
| | | • | · | No |
| _ | n месисан | Wheaton Franciscar | Other. Specify Group | Yes |
| \$12 | | 8608 | Last 4 digits of account number | Creditors Alliance Inc |
| | _ | | _ | Ionpriority Creditor's Name |
| _ | | | When was the debt incurred? | O Box 1288 |
| | | s: Check all that apply | As of the date you file, the claim i | Bloomington, IL 61702 lumber Street City State Zlp Code |
| | | or or occur an anacappi, | , | Vho incurred the debt? Check one. |
| | | | ☐ Contingent | Debtor 1 only |
| | | | ☐ Unliquidated | Debtor 2 only |
| | | | ☐ Disputed | Debtor 1 and Debtor 2 only |
| | | l claim: | Type of NONPRIORITY unsecured | At least one of the debtors and another |
| | | | ☐ Student loans | Check if this claim is for a community |
| t | that you did not | ration agreement or divorce | ☐ Obligations arising out of a sepa | ebt |
| | | | report as priority claims | s the claim subject to offset? |
| | bts | g plans, and other similar de | Debts to pension or profit-sharin | No |
| | | | ■ Other. Specify Collection | ☐ Yes |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 20

| Dental Associates Nonpriority Creditor's Name | Last 4 digits of account number | |
|--|---|---|
| N85 W16186 Appleton Avenue Menomonee Falls, WI 53051-3047 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Dental Expense | |
| Dental Associates Ltd. | Last 4 digits of account number | Ş |
| Nonpriority Creditor's Name 11711 W. Burleigh Street Milwaukee, WI 53222 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Additional Notice | |
| Diversified Adjustment Service | Last 4 digits of account number | 9 |
| Nonpriority Creditor's Name PO Box 32145 | When was the debt incurred? | |
| Minneapolis, MN 55432 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | The of the date year me, the stand let enough that apply | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| \square Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | |
| Yes | ■ Other. Specify Collection | |

| E0110 | 0404 | A0 00 0 |
|--|---|---------|
| ECMC Nonpriority Creditor's Name | Last 4 digits of account number 2161 | \$2,384 |
| 7325 Beaufont Springs, #200 Richmond, VA 23225 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| ECMC | Last 4 digits of account number 2162 | \$(|
| Nonpriority Creditor's Name | | |
| 1 Imation PI | When was the debt incurred? | |
| Saint Paul, MN 55128 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | □ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| Educators Credit Union | Last 4 digits of account number | Unkno |
| Nonpriority Creditor's Name 1400 N Newman Road | When was the debt incurred? | |
| Racine, WI 53406 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| □Yes | ■ Other. Specify | |

| ER Solutions, Inc. | Last 4 digits of account number 0001 | \$0.0 |
|--|---|-------|
| Nonpriority Creditor's Name 800 SW 39th Street | When was the debt incurred? | Ψ0. |
| PO Box 9004 Renton, WA 98057 | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Collection: Verizon Wireless | |
| Eye Car Specialists | Last 4 digits of account number | \$0 |
| Nonpriority Creditor's Name | | *** |
| 735 W. Wisconsin Avenue, #400 Milwaukee, WI 53233 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not | |
| • | report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| ■ No | | |
| Yes | ■ Other. Specify Goods and/or Services | |
| Falls Collection Service, Inc. | Last 4 digits of account number 605A,ious | \$340 |
| Nonpriority Creditor's Name PO Box 668 Germantown, WI 53022 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| No | - Debis to pension of profit-straining plans, and other similar debts | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 20

Page 8 of 20

| First Rate Financial | Last 4 digits of account number | 3786 | \$77 |
|---|--|--|----------|
| Nonpriority Creditor's Name 9228 West Capitol Drive | When was the debt incurred? | 2014 | <u> </u> |
| Milwaukee, WI 53222 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | Пол | | |
| _ | ☐ Contingent | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | |
| ☐ Debtor Fand Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community | ☐ Student loans | | |
| Light Check if this claim is for a community debt list the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | Other. Specify Unsecured | loan | |
| Froedtert Hospital | Last 4 digits of account number | 7027 | \$10 |
| Nonpriority Creditor's Name 9200 West Wisconsin Avenue Milwaukee, WI 53226-3596 | When was the debt incurred? | | |
| Number Street City State Zlp Code | _ As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | - | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane and other similar debte | |
| ■ No | | • • | |
| Yes | Other. Specify Medical Ex | Derise | |
| Get it Now | Last 4 digits of account number | 5850,ious | \$(|
| Nonpriority Creditor's Name 5700 Tennyson Park Plano, TX 75024 | When was the debt incurred? | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | ■ Other. Specify Goods and | - ' | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 20

Page 9 of 20

| Debto | ¹ Devera L. Buchanan | Case number (if know) 16-23613 | |
|-------|---|---|--------|
| 4.2 | | | |
| 6 | Guardian Credit Union | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name 11220 West Oklahoma Avenue West Allis, WI 53227 | When was the debt incurred? 2005 | |
| | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Notice Only - debt believed to be paid off long ago to Preferred Credit | |
| 4.2 | Harris & Harris Ltd Nonpriority Creditor's Name | Last 4 digits of account number 7221 | \$0.00 |
| | 222 Merchandise Mart Plaza, Suite 1900 | When was the debt incurred? | |
| | Chicago, IL 60654 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other Specify Collection: Aurora Sinai Medical Center | |
| | | | |
| 4.2 | IC System Nonpriority Creditor's Name | Last 4 digits of account number | \$0.00 |
| | 301 Sand Lake Road Onalaska, WI 54650 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | - | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Collection: AT&T | |
| | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 20

| Joan Jacobs | Last 4 digits of account number | \$3,600.0 |
|--|---|-----------|
| Nonpriority Creditor's Name 1003 S. Layton Boulevard Milwaukee, WI 53215 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | □ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | ■ Other. Specify Unsecured Signature Loan | |
| JP Recovery | Last 4 digits of account number 3320 | \$63.0 |
| Nonpriority Creditor's Name | Last 4 digits of account number | Ψοσι |
| 20220 Center Ridge Rocky River, OH 44116 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | , | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | □ Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | □ Debts to pension or profit-sharing plans, and other similar debts | |
| | | |
| Yes | ■ Other. Specify Collection: Corecomm | |
| Lighthouse Recovery Associates LLC | Last 4 digits of account number 3496 | \$692.7 |
| Nonpriority Creditor's Name 11551 E. Arapahoe Street #150 | When was the debt incurred? | · |
| Englewood, CO 80112-3833 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | The of the date you me, the stant let. Shook an that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Collection: Pay Day loans | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 20

| Debtor | Devera L. Buchanan | | Case number (if know) | 16-23613 | |
|--------|---|--|---------------------------------|-----------------|------------|
| 1.3 | Med-Health Financial Services, Inc. | Last 4 digits of account number | 7994,ious | | \$1,600.00 |
| | Nonpriority Creditor's Name 10200 W Innovation Drive, #100 PO Box 1996 | When was the debt incurred? | | | |
| | Milwaukee, WI 53201 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce the | nat you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar deb | ts | |
| | Yes | ■ Other. Specify Wisconsin | Children's Hospital o | of | |
| .3 | Med-Health Financial Services, Inc. | Last 4 digits of account number | 1210 | | \$583.00 |
| | Nonpriority Creditor's Name 10200 W Innovation Drive, #100 PO Box 1996 | When was the debt incurred? | | | |
| | Milwaukee, WI 53201 Number Street City State Zlp Code | As of the data was file the plains | Ol | | |
| | Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce the | nat you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar deb | ts | |
| | Yes | Other. Specify Collection: | MCW Physicians | | |
| 3 | Milwaukee Water Works Nonpriority Creditor's Name | Last 4 digits of account number | | | \$0.00 |
| | 841 N. Broadway, Rm. 406 Milwaukee, WI 53202-3687 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | · · | • | |
| | ■ No | Debts to pension or profit-sharing | | ts | |
| | □Yes | ■ Other. Specify Utility Expe | ense | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 12 of 20

Page 12 of 20

| Napierala Law Offices LLC | Lord A. Politic of control of control | \$(|
|--|---|-------|
| Nonpriority Creditor's Name | Last 4 digits of account number | Ψ |
| 227 E. Fairmount Ave. Whitefish Bay, WI 53217 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| lebt s the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| ☐Yes | Other. Specify | |
| National Credit Adjusters | Last 4 digits of account number 2025 | \$(|
| Nonpriority Creditor's Name PO Box 3023 - 327 W 4th Street Hutchinson, KS 67504-3023 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | • | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Collection: Guaranty Bank | |
| DAC | Last 4 digits of account number 0762 | \$211 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| Saraboo, WI 53913-0500 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| lebt s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| No | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| - INO | Other. Specify Collection: Great Lakes Pathologists SC | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 13 of 20

| Omni Credit Services Nonpriority Creditor's Name | Last 4 digits of account number 134 | l3 | | \$101.0 |
|--|--|-------------------------|------------------|---------|
| Roopriority Creditor's Name Bishops Way, Suite 100 Brookfield, WI 53005-6209 | When was the debt incurred? | | | |
| lumber Street City State Zlp Code | As of the date you file, the claim is: Che | eck all that apply | | |
| Vho incurred the debt? Check one. | | | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured clain | 1: | | |
| ☐ Check if this claim is for a community | Student loans | | | |
| lebt s the claim subject to offset? | Obligations arising out of a separation report as priority claims | agreement or divorce | that you did not | |
| No | Debts to pension or profit-sharing plan | s, and other similar de | ebts | |
| Yes | ■ Other. Specify Collection: Aur | ora Medical Gro | oup | |
| Pediatric Radiologic Services | Last 4 digits of account number 346 | 66 | | \$38.0 |
| lonpriority Creditor's Name | When was the debt incurred? | | | |
| Elm Grove, WI 53122 | when was the dept incurred? | | | |
| lumber Street City State Zlp Code | As of the date you file, the claim is: Che | eck all that apply | | |
| Vho incurred the debt? Check one. | | | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured clain | 1: | | |
| Check if this claim is for a community | ☐ Student loans | | | |
| lebt s the claim subject to offset? | Obligations arising out of a separation report as priority claims | agreement or divorce | that you did not | |
| ■ No | ☐ Debts to pension or profit-sharing plan | s and other similar do | ehts | |
| □ Yes | ■ Other. Specify Medical Expens | | | |
| | — Ottler: Opecity | | | |
| Professional Account Management LC | Last 4 digits of account number 776 | 57 | | \$45. |
| Ionpriority Creditor's Name Collection Services Division PO Box 2080 | When was the debt incurred? | | | |
| Milwaukee, WI 53201-2080 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Che | eck all that apply | | |
| Debtor 1 only | ☐ Contingent | | | |
| Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| $\operatorname{\square}$ At least one of the debtors and another | Type of NONPRIORITY unsecured clain | n: | | |
| Check if this claim is for a community | Student loans | | | |
| lebt s the claim subject to offset? | Obligations arising out of a separation | agreement or divorce | that you did not | |
| s the claim subject to offset? ■ No | report as priority claims Debts to pension or profit-sharing plan | s and other similar d | ahts | |
| - INU | - Done to bension of biolit-shalling bigh | o, and other similal U | 00.0 | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 14 of 20

Page 14 of 20

| 1 Devera L. Buchanan | Case number (if know) 16-23613 | |
|--|---|-------------|
| Professional Account Management LLC | Last 4 digits of account number 4581 | \$351.00 |
| Nonpriority Creditor's Name Collection Services Division PO Box 391 | When was the debt incurred? | |
| Milwaukee, WI 53201-0391 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Collection: TCF Bank | |
| Richard Fischer | Last 4 digits of account number | Unknown |
| Nonpriority Creditor's Name 12022 N Ridge Road Meguon, WI 53092 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Back rent and personal loans | |
| Riscuity, Inc. | Last 4 digits of account number | \$0.00 |
| Nonpriority Creditor's Name 225 Townpark Drive | When was the debt incurred? | |
| Kennesaw, GA 30144 | As of the data was file the plains in O I. Will be | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| | Other. Specify Collection | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 15 of 20

| Debt | or 1 Devera L. Buchanan | Case number (if know) 16-23613 | |
|----------|--|--|----------|
| 4.4 4 | Sprint | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name Bankruptcy Dept. 1310 Martin Luther King Drive | When was the debt incurred? | |
| | Bloomington, IL 61701 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Goods and/or Services | |
| 4.4 5 | St. Joseph | Last 4 digits of account number | \$86.66 |
| | Nonpriority Creditor's Name Box 68-9510 Milwaukee, WI 53268-9510 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Medical Expense | |
| 4.4 6 | State of Wisconsin | Last 4 digits of account number 7527 | \$207.63 |
| | Nonpriority Creditor's Name Department of Workforce Development | When was the debt incurred? | |
| | Div of Unemployment Ins/Collections PO Box 7888 Madison, WI 53707-7888 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | ■ Other. Specify Overpayment of benefits | |
| | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 16 of 20

| Stat | te of Wisconsin | Last 4 digits of account number | \$0.0 |
|----------------|--|--|-------|
| Dep Dev | oriority Creditor's Name partment of Workforce relopment of Unemployment | When was the debt incurred? | |
| | Collections | | |
| | Box 7945 | | |
| | dison, WI 53707-7945 ber Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | incurred the debt? Check one. | Chock and that of the control of the | |
| ■ D | Debtor 1 only | ☐ Contingent | |
| □ D | Debtor 2 only | ☐ Unliquidated | |
| □ D | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At | at least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| □с | Check if this claim is for a community | ☐ Student loans | |
| | e claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ N | lo | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Ye | 'es | ■ Other. Specify Additional Notice | |
| | | | |
| | e & Kirlin Associates | Last 4 digits of account number | \$0.0 |
| 281 | oriority Creditor's Name 0 Southampton Road ladelphia, PA 19154 | When was the debt incurred? | |
| | ber Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who | incurred the debt? Check one. | | |
| ■ D | Pebtor 1 only | ☐ Contingent | |
| □ D | Debtor 2 only | ☐ Unliquidated | |
| □ D | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At | at least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | check if this claim is for a community | ☐ Student loans | |
| debt Is the | e claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ N | <u>-</u> | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Ye | | ■ Other. Specify | |
| | | | |
| TCF | Bank | Last 4 digits of account number | \$0.0 |
| PO | oriority Creditor's Name Box 170995 waukee, WI 53217 | When was the debt incurred? | |
| Numb | ber Street City State Zlp Code incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ D | Debtor 1 only | ☐ Contingent | |
| □ D | Debtor 2 only | ☐ Unliquidated | |
| □ D | Debtor 1 and Debtor 2 only | □ Disputed | |
| _ | at least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| _ | Check if this claim is for a community | ☐ Student loans | |
| debt | _ | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ N | lo | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| _ | 'es | Other. Specify | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 17 of 20

| Thomas Gearge Associates, Ltd. | Last 4 digits of account number 4082 | \$5,122.1 |
|---|---|-----------|
| Nonpriority Creditor's Name PO Box 30 | When was the debt incurred? | |
| East Northport, NY 11731 Number Street City State Zlp Code | As of the data year file the plains in Check all that apply | |
| Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | Other. Specify | |
| Universal Underwriters Group | Last 4 digits of account number | \$0.0 |
| Nonpriority Creditor's Name | | <u> </u> |
| c/o Darnieder & Geraghty 735 N. Water St. #930 | When was the debt incurred? | |
| Milwaukee, WI 53202 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | no of the date you me, the claim to. Shook an that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Additional Notice: Guardian Credit Union | |
| Verizon Wireless Bankruptcy Dept | Last 4 digits of account number 9720 | \$503. |
| Nonpriority Creditor's Name | | * |
| PO Box 3397 | When was the debt incurred? | |
| Bloomington, IL 61702 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ■ Other Specify Goods and/or Services | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 18 of 20

| Wisconsin Auto Title Loans | Last 4 digits of account number | | \$1,0 |
|---|--|--|------------------|
| Nonpriority Creditor's Name 1310 W. Lincoln Avenue Milwaukee, WI 53215 | When was the debt incurred? | 2009 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Non-purcha | ase money lien on a 2004 Dodge | |
| Your Credit | Last 4 digits of account number | 0243 | Unk |
| Nonpriority Creditor's Name 25331 10 West #101 San Antonio, TX 78257 | When was the debt incurred? | | |
| Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Unsecured | loan | |
| List Others to Be Notified About a Despace only if you have others to be notified g to collect from you for a debt you owe to shore than one creditor for any of the debts the for any debts in Parts 1 or 2, do not fill out | about your bankruptcy, for a debt that your bankruptcy, for a debt that your ended in the original creditor in at you listed in Parts 1 or 2, list the addit | Parts 1 or 2, then list the collection agency | here. Similarly, |
| d Address | On which entry in Part 1 or Part 2 did you | list the original creditor? | |
| der & Geraghty :. Darnieder | _ | Part 1: Creditors with Priority Unsecured Clain | |
| rth Water Street, Suite 930 ikee, WI 53202 | - | Part 2: Creditors with Nonpriority Unsecured C | Claims |
| | Last 4 digits of account number | | |
| d Address | On which entry in Part 1 or Part 2 did you | | |
| an Credit Union /est National Avenue | | Part 1: Creditors with Priority Unsecured Clain | |
| Joe Hational Atomas | Last 4 digits of account number | Part 2: Creditors with Nonpriority Unsecured C | Claims |
| ıkee, WI 53215 | | | |
| · | On which entry in Part 1 or Part 2 did you | list the original creditor? | |
| kee, WI 53215 d Address Law Office SC | On which entry in Part 1 or Part 2 did you Line 4.36 of (<i>Check one</i>): | | ns |
| d Address | Line <u>4.36</u> of (<i>Check one</i>): □ | list the original creditor? Part 1: Creditors with Priority Unsecured Clain Part 2: Creditors with Nonpriority Unsecured C | |

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

Page 19 of 20

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 23,570.39 |
| | 6i. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 23,570.39 |

Page 20 of 20